

**LITTLE TRAVERSE BAY BANDS OF ODAWA INDIANS
HUMAN SERVICES DEPARTMENT**



AUTHORIZATION FOR CRIMINAL BACKGROUND INVESTIGATION

Name: _____

Maiden name or other names used: _____

Date of Birth: _____ Race: _____

Phone Number: _____

Please list ALL criminal history information charges/convictions and dates:

I understand that my signature allows the LTBB Human Services Department to run a criminal background investigation on myself. I agree that the information above is all accurate and true to the best of my knowledge.

Printed Name

Signature

Date

Mailing Address: 7500 Odawa Circle, Harbor Springs, MI 49740
Physical Address: 915 Emmet Street, Petoskey, MI 49770
Phone: (231) 242-1620 Fax: (231) 242-1635